FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OCT 1 0 2006

USE ONLY

OMB APPROVAL

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OMB Number:

Expires:

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May 31, 2005

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	9202
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Preferred Term Securities XXIII, Ltd. (the "Issuer")	
	ection 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Preferred Term Securities XXIII, Ltd. (the "Issuer")	(2.1)
Address of Executive Offices (Number and Street, City, State, ZIP Code) c/o Maples Finance Limited, Queensgate House, PO Box 1093 GT, South Church Street, George	Telephone Number (Including Area Code) (345) 945 - 7100
Address of Principal Business Operations (Number and Street, City, State, ZIP Code) (if different from Executive Offices) Same as above	Telephone Number (Including Area Code) Same as above
Brief Description of Business The Issuer has been established to acquire a portfolio of collateral securities issued by various issuers.	PPACTOR
Type of Business Organization Corporation Imited partnership, already formed other (please spec	ity): BOCT 1 6 2003
business trust limited partnership, to be formed Month Year	Actual EstimatedOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the dat it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, to information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that ha This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that ha standard this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a standard this form is the proper amount shall accompany this form. This notice shall be filed in the appropriates in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless form displays a currently valid OMB number.

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A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Bunton, Carrie
Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 1093 GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Ebanks, Wendy
Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 1093 GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Maples Finance Limited
Business or Residence Address (Number and Street, City, State, Zip Code) c/o P.O. Box 1093 GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В.	INFORMA	TION AB	OUT OFFI	ERING				VEC	NO
List I was a first of Coming 2								YES	NO					
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Ч	كا				
Annual and the supportant of the support										\$100,000				
2.	what is	the minimi	ım investi	ment that v	viii de acce	pted from a	ily marvidu					,		
													YES	NO
3.	Does the	offering p	ermit joir	nt ownershi	ip of a sing	le unit?							\boxtimes	L
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission								nmission						
	or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name													
	of the bi	oker or de	aler. If m	ore than fi	ive (5) pers	ons to be li	sted are ass	sociated per	sons of suc	h a broker	or dealer,	you may		
	set forth	the inform	nation for	that broker	or dealer of	only.							···	
Full Na	me (Las	t name firs	t, if indivi	dual)										
Keefe	Rruve	tte & Woo	ds. Inc.	•										
				nber and S	treet, City,	State, Zip	Code)							
		venue, No			10019									
Name o	of Associ	ated Broke	er or Deale	er										
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Name	of Assoc	iated Brok	er or Deal	ler										
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

^{*}FTN is a division of a national bank and will offer and sell the securities in states where banks are excluded from the definition of "broker-dealer" or exempted from registration therefrom.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate of ring price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none"-or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. **Amount Already** Aggregate Offering Price Sold Type of Security \$1,558,640,000 Debt \$1,558,640,000 Equity Common Preferred Convertible Securities (including warrants) \$-0-\$-0-Partnership Interests \$ - 0 -\$-0-) \$-0-\$ - 0 -Other (Specify Total..... \$1,558,640,000 \$1,558,640,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate **Dollar Amount** Number of Purchases Investors Accredited Investors \$1,558,640,000 91 \$-0-Non-accredited investors - 0 -Total (for filings under Rule 504 only) N/A \$N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. **Dollar Amount** Type of Security Sold Type of offering Rule 505..... N/A \$ N/A Regulation A N/A \$ N/A Rule 504..... N/A \$ N/A Total..... \$ N/A N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Printing and Engraving Costs..... \$60,000 Legal Fees \$2,861,000 Accounting Fees..... Engineering Fees.....

Other Expenses (identify) Rating Agencies (\$2,227,000) + Other (\$400,000)......

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceed proceeds to the issuer."

\$1,509,650,781

Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Paymen Office Director Affilia	rs, & Payments to
Salaries and fees	⊠ \$	- 0 -	\$ - 0 -
Purchase of real estate	⊠ s	- 0 -	S-0-
Purchase, rental or leasing and installation of machinery and equipment	⊠ s	- 0 -	\$-0-
Construction or leasing of plant buildings and facilities		- 0 -	S-0-
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another	 s ⊠		⊠ \$-0-
issuer pursuant to a merger)	⊠. <u>³</u> ⊠.s		
Repayment of indebtedness Working capital			<u> </u>
Other (specify): Purchase of capital securities	 ⊠ s	5 - 0 -	\$1,507,245,147.40
Purchase of Reserve Account strip.	⊠ s	§ - 0 -	\$2,405,633.60
Column Totals	🛛 s	§ - 0 -	\$1,509,650,781
Total Payments Listed (column totals added)		\boxtimes	\$1,509,650,781

y "								
	D. FEDERAL SIGNATURE							
The issuer has duly caused this notice to be signed by the signature constitutes an undertaking by the issuer to furnished by the issuer to any non-accredited	sh to the U.S. Securities and Exchange C	ommission, upon written request of its statt, the						
Issuer (Print or Type) PREFERRED TERM SECURITIES XXIII, LTD.	Signature QQ	Date Sept. 26,2006						
Name of Signer (Print or Type)	Title of Signer (Print or Type)							
Carrie Bunton	Director	• ,						
Carrie Dunton								
Intentional misstatements or omission	ATTENTION as of fact constitute federal cr	iminal violations. (See 18 U.S.C. 1001).						
	E. STATE SIGNATURE							
Is any party described in 17 CFR 230.262 presently Not applicable	subject to any of the disqualification pro	······						
The undersigned issuer hereby undertakes to furn CFR 239.500) at such times as required by state la	nish to any state administrator of any staw. Not applicable.	ate in which this notice is filed, a notice on Form D (17						
The undersigned issuer hereby undertakes to fu offerees. Not applicable.	mish to the state administrators, upon	written request, information furnished by the issuer to						
 The undersigned issuer represents that the issuer is Exemption (ULOE) of the state in which this no burden of establishing that these conditions have be 	otice is filed and understands that the is	e satisfied to be entitled to the Uniform Limited Offering sour claiming the availability of this exemption has the						
The issuer has read this notification and knows the contauthorized person.	ents to be true and has duly caused this	notice to be signed on its behalf by the undersigned duly						
Issuer (Print or Type)	Signature	Date						
PREFERRED TERM SECURITIES XXIII, LTD.	OFF	Sept. 26, 2006						
Name (Print or Type)	Title (Print or Type)	· · · · · · ·						
Carria Runton	Director	Director						

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.